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| Substitute for form 1449A/PTO | | | | Complete If Known | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | | Application Number | 10/776,021 |
| | | | | Filing Date | February 9, 2004 |
| | | | | First Named Inventor | SHEHADA, Ramez Emile Necola |
| | | | | Art Unit | 3761 |
| | | | | Examiner Name | HAND, Melanie Jo |
| Sheet | 1 | of | 1 | Attorney Docket Number | 064693-0103 |

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| Examiner Signature | /Melanie Hand/ | Date Considered | 08/07/2006 |
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language translation is attached.